



Bankers Trust Company

Four Albany Street, New York, New York 10015

CORPORATE TRUST AND AGENCY GROUP

Mailing Address:
P.O. Box 318, Church Street Station
New York, New York 10015

TO THE HOLDERS OF
MHS HOLDINGS CORPORATION
16 7/8% SUBORDINATED PAY-IN-KIND DEBENTURES DUE 2004

MHS Holdings Corporation has elected to pay the April 1, 1992 interest payment for the above captioned issue in additional debentures in lieu of a cash payment. The attached certificate, therefore, represents the amount of interest payable to you on April 1, 1992. The rate per dollar is .084375.

BANKERS TRUST COMPANY,
AS PAYING AGENT

Dated: April 1, 1992

Attachment

HOLDERS SHOULD BE AWARE THAT THIS SECURITY IS ISSUED WITH ORIGINAL ISSUE DISCOUNT AND THAT DEBTORATION OR PAYMENT REFERRED ON THIS SECURITY (WHETHER AS INTEREST OR PRINCIPAL) WILL NOT BE DETERMINATIVE FOR FEDERAL INCOME TAX PURPOSES.

REGISTERED



16 7/8%
DUE 2004

MHS Holdings Corporation, a Delaware corporation, promises to pay to

LORRAINE T. MANGI
100 S. 9TH AVENUE
MILLION DOLLAR

\$ 225,360
*****117-12*****
*****117-12*****
*****117-12*****

or registered assigns,
the principal sum of

on the date of maturity.

RECEIVED
Interest Payment Dates: April and October
Record Dates: March 15 and September 15
Date of Maturity: September 22, 2004 **RECD**

MHS HOLDINGS CORPORATION

By

TRUSTEE'S CERTIFICATE OF AUTHENTICATION

This is one of the Securities
described in the within-mentioned Indenture.
BANKERS TRUST COMPANY,
as Trustee
BY

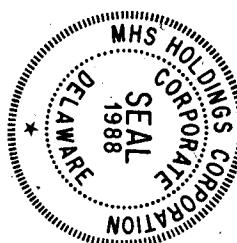
Dated:

04/01/92

Authorized Signature

Treasurer

President



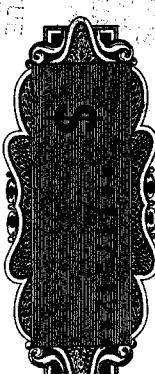
16 7/8% SUBORDINATED PAY-IN-KIND DEBENTURE DUE 2004

CUSIP 553024 AA 8
SEE REVERSE FOR CERTAIN DEFINITIONS

16 7/8%
DUE 2004

DOLLARS

REGISTERED



HOLDERS SHOULD BE AWARE THAT THIS SECURITY IS ISSUED WITH ORIGINAL ISSUE DISCOUNT AND THAT DEBTORATION OR PAYMENT REFERRED ON THIS SECURITY (WHETHER AS INTEREST OR PRINCIPAL) WILL NOT BE DETERMINATIVE FOR FEDERAL INCOME TAX PURPOSES.



Bankers Trust Company

Four Albany Street, New York, New York 10006
FAX Machine: 212-250-6961/6392

CORPORATE TRUST AND AGENCY GROUP

Mailing Address:
P.O. Box 318, Church Street Station
New York, New York 10008

**TO THE HOLDERS OF
MHS HOLDINGS CORPORATION
16 7/8% SUBORDINATED PAY-IN-KIND DEBENTURES DUE 2004**

MHS Holdings Corporation has elected to pay the October 1, 1992 interest payment for the above captioned issue in additional debentures in lieu of a cash payment. The attached certificate, therefore, represents the amount of interest payable to you on October 1, 1992. The rate per dollar is .084375.

**BANKERS TRUST COMPANY,
AS PAYING AGENT**

Dated: October 1, 1992

Attachment

REGISTERED

HOLDERS SHOULD BE AWARE THAT THIS SECURITY IS ISSUED WITH ORIGINAL ISSUE DISCOUNT AND THAT DENOMINATOR OF PAYMENTS RECEIVED ON THIS SECURITY (WHETHER AS INTEREST OR PRINCIPAL) WILL NOT BE DETERMINATIVE FOR FEDERAL TAX PURPOSES.

AS REQUIRED BY SECTION 1275 OF THE UNITED STATES INTERNAL REVENUE CODE, FOR THE PERIOD FROM OCTOBER 1, 1985 AND THE TREASURY REGULATIONS PROMULGATED THEREUNDER, THE SECURITIES FORTH THE FOLLOWING INFORMATION CONCERNING "ORIGINAL ISSUE DISCOUNT" ON THIS SECURITY: (I) THE AMOUNT OF ORIGINAL ISSUE DISCOUNT; (II) THE REGISTERED SECURITY; (III) THE AMOUNT OF PRINCIPAL; (IV) THE DISCOUNT PER \$1,000 PRINCIPAL AMOUNT; (V) THE ISSUE DATE IS SEPTEMBER 12, 1989; (VI) THE YIELD TO MATURITY IS 41.77%; (VII) THE PRINCIPAL AMOUNT IS \$3,924.99; (VIII) THE AMOUNT OF THE ORIGINAL ISSUE DISCOUNT ALLOCABLE TO THE SHORT ACCRUAL PERIOD ENDING OCTOBER 1, 1989, CALCULATED UNDER THE APPROXIMATE METHOD, IS \$1,000 PRINCIPAL AMOUNT.

MHS HOLDINGS CORPORATION

16 7/8% SUBORDINATED PAY-IN-KIND DEBENTURE DUE 2004

CUSIP 553024 AA 8
SEE REVERSE FOR CERTAIN DEFINITIONS

167/8%
DUE 2004

MHS Holdings Corporation, a Delaware corporation, promises to pay to

or registered assigns
the principal sum of

on the date of maturity.

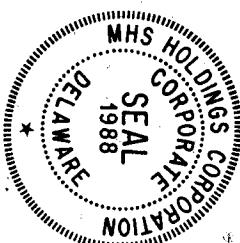
Dated:
10/01/92

TRUSTEE'S CERTIFICATE OF AUTHENTICATION

described in the within-mentioned Indenture.

BANKERS TRUST COMPANY,
as Trustee

Authorized Signatures



553024AAB R 00011699

卷之三

AMERICAN BANK NOTE COMPANY

S-15

REGISTERED

REGISTERED

HOLDERS SHOULD BE AWARE THAT THIS SECURITY IS ISSUED WITH ORIGINAL ISSUE DISCOUNT AND THAT DENOMINATION
 REQUIREMENTS REFERRED TO IN THE INDENTURE AGREEMENT WHICH APPLICABLE TO THE SECURITY ARE DETERMINED
 BY THE TREASURY REGULATIONS PROMULGATED THEREUNDER. THE COMPANY
 AGREES TO FURNISH UPON REQUEST THE FOLLOWING INFORMATION CONCERNING "ORIGINAL ISSUE DISCOUNT":
 (i) THE SECURITY; (ii) THE AMOUNT OF ORIGINAL ISSUE DISCOUNT PER \$1,000 PRINCIPAL AMOUNT;
 (iii) THE ISSUE DATE IS SEPTEMBER 22, 1989; (iv) THE YIELD TO MATURITY IS 41.7%;
 AND (v) THE AMOUNT OF THE ORIGINAL ISSUE DISCOUNT ALLOCABLE TO THE SHORT ACCRUAL
 PERIOD ENDING OCTOBER 1, 1989, CALCULATED UNDER THE APPROXIMATE METHOD, IS \$1.46,
 PER \$1,000 PRINCIPAL AMOUNT.

HOLDERS SHOULD BE AWARE THAT THIS SECURITY IS ISSUED WITH ORIGINAL ISSUE
 DISCOUNT AND THAT THE DENOMINATION OF PAYMENTS RECEIVED ON THIS SECURITY
 (WHETHER AS INTEREST OR PRINCIPAL) WILL NOT BE DETERMINATIVE FOR FEDERAL INCOME
 TAX PURPOSES.

MHS HOLDINGS CORPORATION

16 7/8% SUBORDINATED PAY-IN-KIND DEBENTURE DUE 2004

CUSIP 553024 AA B
SEE REVERSE FOR CERTAIN DEFINITIONS

MHS Holdings Corporation, a Delaware corporation, promises to pay to

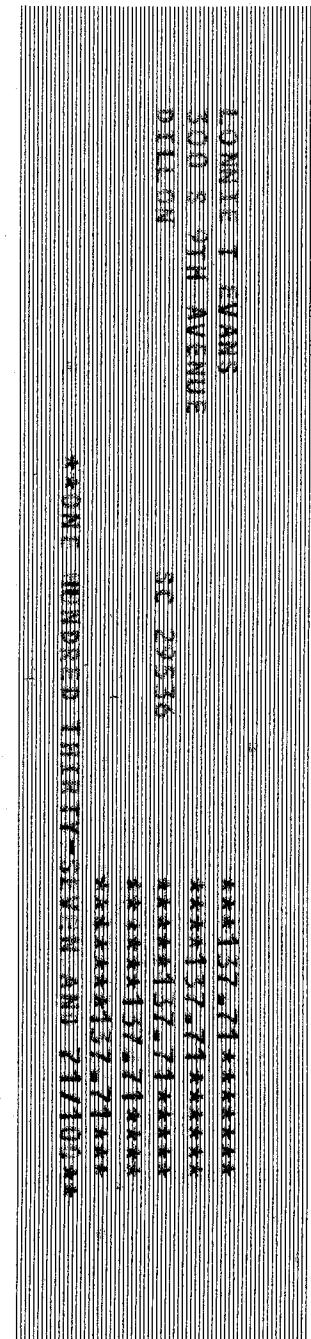
16 7/8%
DUE 2004

LORRAINE T. EVANS
 300 S. 37TH AVENUE
 DELAWARE 38000
 SE 29536

*****137-7144***
 *****137-7144***
 *****137-7144***
 *****137-7144***
 *****137-7144***

or registered assigns,
the principal sum of

on the date of maturity.



16 7/8%
DUE 2004
DOLLARS

Dated: 04/01/93

MHS HOLDINGS CORPORATION
By

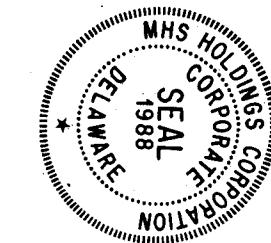
By

Treasurer

TRUSTEE'S CERTIFICATE OF AUTHENTICATION
 This is one of the Securities
 described in the within-mentioned Indenture.
BANKERS TRUST COMPANY,
 as Trustee
 By

Authorized Signature

Treasurer



Treasurer

President

HOLDERS SHOULD BE AWARE THAT THIS SECURITY IS ISSUED WITH ORIGINAL ISSUE DISCOUNT AND THAT DENOMINATION OF PAYMENTS RECEIVED ON THIS SECURITY WILL NOT BE DETERMINATIVE FOR FEDERAL INCOME TAX PURPOSES.

REGISTERED

REQUERIED BY SECTION 1275 OF THE UNITED STATES INTERNAL REVENUE CODE, THE FOLLOWING INFORMATION CONCERNING "ORIGINAL ISSUE DISCOUNT" ON THIS SECURITY: (i) THE AMOUNT OF ORIGINAL ISSUE DISCOUNT; (ii) THE \$5,924.99; (iii) THE ISSUE DATE IS SEPTEMBER 22, 1989; (iv) THE YIELD TO MATURITY IS 41.77%; AND (v) THE AMOUNT OF THE ORIGINAL ISSUE DISCOUNT ALLOCABLE TO THE SHORT ACCRUAL PERIOD ENDING OCTOBER 1, 1989, CALCULATED UNDER THE APPROXIMATE METHOD, IS \$1.46 PER \$1,000 PRINCIPAL AMOUNT.

HOLDERS SHOULD BE AWARE THAT THIS SECURITY IS ISSUED WITH ORIGINAL ISSUE DISCOUNT AND THAT THE DENOMINATION OF PAYMENTS RECEIVED ON THIS SECURITY WHETHER AS INTEREST OR PRINCIPAL WILL NOT BE DETERMINATIVE FOR FEDERAL INCOME TAX PURPOSES.

MHS HOLDINGS CORPORATION**16 7/8% SUBORDINATED PAY-IN-KIND DEBENTURE DUE 2004**CUSIP 553024 AA E
SEE REVERSE FOR CERTAIN DEFINITION:**MHS Holdings Corporation**, a Delaware corporation, promises to pay to**16 7/8%**
DUE 2004

LONNIE T. EVANS
300 S. 9TH AVENUE
6 MILLION
SE 29536

or registered assigns,
the principal sum of

on the date of maturity.

R E C E I P T
 Interest Payment Dates: April 1 and October 1
 Record Dates: March 15 and September 15
 Date of Maturity: September 22, 1989
R E C E I P T

MHS HOLDINGS CORPORATION

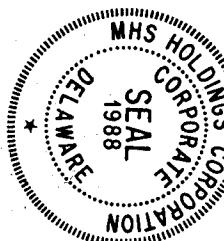
By

Dated:

10/01/93**TRUSTEE'S CERTIFICATE OF AUTHENTICATION**

This is one of the Securities described in the within-mentioned Indenture.
BANKERS TRUST COMPANY,
 as Trustee
 BY

Authorized Signature



Treasurer

Joh B. Evans
 President

16 7/8%
DUE 2004

DOLLAR!



Bankers Trust Company

Four Albany Street, New York, New York 10006

Mailing Address:
P.O. Box 318, Church Street Station
New York, New York 10008

CORPORATE TRUST AND AGENCY GROUP

**TO THE HOLDERS OF
MHS HOLDINGS CORPORATION
16 7/8% SUBORDINATED PAY-IN-KIND DEBENTURES DUE 2004**

MHS Holdings Corporation has elected to pay the April 1, 1994 interest payment for the above captioned issue in additional debentures in lieu of a cash payment. The attached certificate, therefore, represents the amount of interest payable to you on April 1, 1994. The rate per dollar is .084375.

**BANKERS TRUST COMPANY,
AS PAYING AGENT**

Dated: April 1, 1994

Attachment

NM 26791

Mohasco Corporation

New York

This is to certify that

9220-000 20447-000-0530

JOSEPH R. HANAZON
SECRETARY

is the owner of

LINDA L. SWAN
300 S. 5TH AVE
DALLAS, TX 75201

MOHACO CORPORATION

Full-paid and non-assessable shares of the par value of \$5 each of the common stock

of Mohasco Corporation, transferred on the books of the corporation in person or by duly authorized attorney upon surrender of this certificate properly endorsed. This certificate and the shares represented hereby are issued and shall be held subject to all the provisions of the by-laws of Mohasco Corporation, a copy of which is on file with the Transfer Agent, the holder of which shall be responsible for compliance therewith. This certificate is not valid unless countersigned by the Transfer Agent and registered by the Registrar.

Dated: MAR 1 1983

Joseph R. Hanazon
Secretary

CHAIRMAN
OF THE BOARD

Countersigned and Registered:

Manufacturers Hanover Trust Company,

Transfer Agent and Registrar

By

Authorized Officer

Transfer Agent and Registrar

40

Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

1988 (1)

OMB No. 1545-0074

el
use IRS label.
Otherwise,
please print or
type.

For the year Jan.–Dec. 31, 1988, or other tax year beginning

, 1988, ending

19

L A B E L H E R E	Your first name and initial (if joint return, also give spouse's name and initial) <i>Lorraine</i> Present home address (number, street, and apt. no. or rural route). (If a P.O. Box, see page 6 of Instructions.) City, town or post office, state, and ZIP code	Last name <i>Evans</i> For Privacy Act and Paperwork Reduction Act Notice, see Instructions.
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**Presidential
Election Campaign**

Do you want \$1 to go to this fund?
If joint return, does your spouse want \$1 to go to this fund?

Yes
Yes

No
No

Note: Checking "Yes" will
not change your tax or
reduce your refund.

Filing StatusCheck only
one box.

- | |
|---|
| 1 Single
2 Married filing joint return (even if only one had income)
3 Married filing separate return. Enter spouse's social security no. above and full name here.
4 <input checked="" type="checkbox"/> Head of household (with qualifying person). (See page 7 of Instructions.) If the qualifying person is your child but not your dependent, enter child's name here.
5 Qualifying widow(er) with dependent child (year spouse died ► 19). (See page 7 of Instructions.) |
|---|

Exemptions(See
Instructions
on page 8.)If more than 6
dependents, see
Instructions on
page 8.

6a <input checked="" type="checkbox"/> Yourself If someone (such as your parent) can claim you as a dependent, do not check box 6a. But be sure to check the box on line 33b on page 2. b <input type="checkbox"/> Spouse	No. of boxes checked on 6a and 6b No. of your children on 6c who: <ul style="list-style-type: none"> ● lived with you ● didn't live with you due to divorce or separation No. of other dependents listed on 6c
c Dependents: (1) Name (first, initial, and last name) <i>Clara Evans</i> (2) Check if under age 5 <i>247-24-8916</i> (3) If age 5 or older, dependent's social security number <i>mother</i> (4) Relationship <i>12</i> (5) No. of months lived in your home in 1988	
d If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here ► <input type="checkbox"/>	
e Total number of exemptions claimed	

Add numbers
entered on
lines above ► **2**

IncomePlease attach
Copy B of your
Forms W-2, W-2G,
and W-2P here.If you do not have
a W-2, see
page 6 of
Instructions.Please
attach check
or money
order here.

7 Wages, salaries, tips, etc. (attach Form(s) W-2) 8a Taxable interest income (also attach Schedule B if over \$400) b Tax-exempt interest income (see page 11). DON'T include on line 8a 8b	7 24791 — 8a 242 — 8b
9 Dividend income (also attach Schedule B if over \$400)	
10 Taxable refunds of state and local income taxes, if any, from worksheet on page 11 of Instructions	
11 Alimony received	
12 Business income or (loss) (attach Schedule C)	
13 Capital gain or (loss) (attach Schedule D)	
14 Capital gain distributions not reported on line 13 (see page 11)	
15 Other gains or (losses) (attach Form 4797)	
16a Total IRA distributions 17a Total pensions and annuities	16b Taxable amount (see page 11) <i>718</i> 17b Taxable amount (see page 12)
18 Rents, royalties, partnerships, estates, trusts, etc. (attach Schedule E)	
19 Farm income or (loss) (attach Schedule F)	
20 Unemployment compensation (insurance) (see page 13)	
21a Social security benefits (see page 13) b Taxable amount, if any, from the worksheet on page 13	21a 21b 21b
22 Other income (list type and amount—see page 13)	
23 Add the amounts shown in the far right column for lines 7 through 22. This is your total income ► 26123 —	

**Adjustments
to Income**(See
Instructions
on page 13.)

24 Reimbursed employee business expenses from Form 2106, line 13. 25a Your IRA deduction, from applicable worksheet on page 14 or 15 b Spouse's IRA deduction, from applicable worksheet on page 14 or 15	24 25a 25b
26 Self-employed health insurance deduction, from worksheet on page 15	
27 Keogh retirement plan and self-employed SEP deduction	
28 Penalty on early withdrawal of savings	
29 Alimony paid (recipient's last name _____ and social security no. _____)	
30 Add lines 24 through 29. These are your total adjustments ► 30	

**Adjusted
Gross Income**

31 Subtract line 30 from line 23. This is your **adjusted gross income**. If this line is less than \$18,576 and a child lived with you, see "Earned Income Credit" (line 56) on page 19 of the instructions. If you want IRS to figure your tax, see page 16 of the instructions ► **31** **26123** —

PAYER'S NAME, ADDRESS, ZIP CODE & FEDERAL I.D. NO.

of 15

CORRECTED COPY (if checked)

MOHASCO CORPORATION COMMON STOCK 14-1419275 % MANUFACTURERS HANOVER TRUST COMPANY PO BOX 24103 CHURCH STREET STATION NEW YORK, NY 10249 1988 This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction will be imposed on you if this income is taxable and the IRS determines that it has not been reported. Statement for Recipients of DIVIDEND INCOME	1. TOTAL INCOME	2. INVESTMENT EXPENSES INCLUDED IN BOX 1
	8.35	
	3. CAPITAL GAIN DISTRIBUTION	4. FEDERAL INCOME TAX WITHHELD
5. NONTAXABLE DISTRIBUTIONS (IF DETERMINABLE)		
RECIPIENTS IDENTIFICATION NO.		SUBSTITUTE FORM 1099-DIV
251-90-0671		
LONNIE T EVANS 300 S 9TH AVE DILLON, SC 29536-3810		
ACCT 2641611530 Copy B for Recipient OMB No. 1545-0110		

14

45122

Department of the Treasury—Internal Revenue Service

1099SP

BANKERS TRUST COMPANY AS AGENT FOR
 MHS HOLDINGS CORPORATION
 16-7287 SUB PAY-IN-KIND DEF OUT 2004
 P.O. BOX 2629
 CHURCH STREET STATION
 NEW YORK, N.Y. 10008

**Statement for 1988
Recipients of**
**ORIGINAL ISSUE
DISCOUNT**

13-3672113

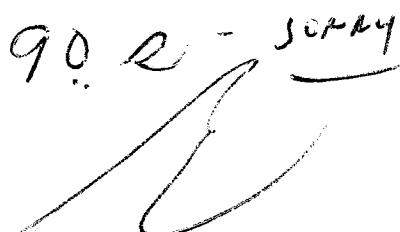
This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanctions will be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Department of the Treasury—Internal Revenue Service

Substitute Form 1099-OID OMB No. 1545-0110

Record owner's identifying number 251-90-0671	1 Total original issue discount 16.00	2 Other periodic interest	3 Early withdrawal penalty	4 Federal income tax withheld .00
LONNIE T EVANS 300 S 9TH AVENUE DILLON		SC 29536	M 0310-0006	

COULD NOT FIND 1990 2-5074



P A Y E R	MANUFACTURERS HANOVER TRUST CO TRUSTEE FOR MOHASCO SALLPAY50P 530 5TH AVENUE, 4TH FLOOR NEW YORK NY 10036		Year 1988	OMB No. 1545-0008 Statement for Recipients of Annuities, Pensions, Retired Pay, or IRA Payments		
			13-3192633			
				Copy C For Recipient's Records		
				This information is being furnished to the IRS and appropriate State officials.		
Recipient's social security no. [REDACTED]	Gross annuity, pension, etc. 718.23	10 Taxable amount 718.23	11 Federal income tax withheld 0.00			
		TA not yet determined	De- ceased	Legal rep	Distribution code	
Recipient's name LONNIE T EVANS 300 S 9TH AVE DILLON	SC 29536	State income tax withheld 0.00	Name of state			
Recipient's address and ZIP code						

FORM W2P - Department of the Treasury
Internal Revenue Service

Schedules A&B (Form 1040) 1980

Name(s) shown on Form 1040-1985

Longie

OMB No. 1545-0072

Page 2

Your social security number

Form 1040. (Do not enter name and social security number if
Lonnie T. Evans

Attachment
Sequence No. 08

Part I Interest Income

(See
Instructions on
pages 10 and 27.)

Note: If you received a Form 1099-INT or Form 1099-OID from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

Part II Dividend Income

(See
Instructions on
pages 10 and
27.)

Note: If you received a Form 1099-DIV from a brokerage firm, list the firm's name as the payer and enter the total dividends shown on that form.

Schedule B—Interest and Dividend Income

Interest and Dividend Income

Interest Income		Interest payment dates, see page 27.	
		Amount	
1	Interest income from seller-financed mortgages. (See Instructions and list name of payer.) ►		
2	Other interest income. (List name of payer.)		
	First Citizens Bank	332	-
	Banks Trust	12	-
	South Carolina National Bank	90	=
2			
3	3 Add the amounts on lines 1 and 2. Enter the total here and on Form 1040, line 8a. ►	438	-
If you received more than \$400 in gross dividends and/or other distributions on stock and III. If you received, as a nominee, dividends that			

3 Add the amounts on lines 1 and 2. Enter the total here and on Form 1040, line 8a.
If you received more than \$400 in gross dividend and III. If you received

If you received more than \$400 in gross dividends and/or other distributions on stock, you must complete Parts II and III. If you received, as a nominee, dividends that actually belong to another person, see page 27.

5 Add the amounts on line 4. Enter the total here
6 Capital gain distributions. Enter here and on Schedule D*
7 Nontaxable distributions. (See the Instructions for Form 1040, line 9.)
8 Add the amounts on lines 6 and 7. Enter the total here
9 Subtract line 8 from line 5. Enter the result here and on Form 1040, line 9
**If you received capital gain distributions but do not need Schedule D to
Instructions for Form 1040, lines 13 and 14.*

If you received more than \$400 of interest or dividends, OR if you had a foreign account or were a grantor of, or a transferor to, a foreign trust, you must answer both questions in Part III.

10a At any time during 1989, did you have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? (See page 27 of the Instructions for exceptions and filing requirements for Form TD F 90-22.1.)

b If "Yes," enter the name of the foreign country ►

11 Were you the grantor of, or transferor to, a foreign trust that existed during 1989, whether or not you have any beneficial interest in it? If "Yes," you may have to file Form 3520, 3520-A, or 926.

12 *For more information about foreign trusts, see Part III.*

13 *For more information about foreign accounts, see Part III.*

14 *For more information about the Foreign Account Tax Compliance Act Notice, see Form 1040 Instructions.*

Part III Foreign Accounts and Foreign Trusts

(See
Instructions
on page 27.)

For Paperwork Reduction Act Notice, see Form 1040 Instructions.

BANKERS TRUST COMPANY AS AGENT FOR
MHS HOLDINGS CORPORATION
16 7/8% SUB PAY-IN-KIND DEB OUF 2004
P.O. BOX 2579
CHURCH STREET STATION
NEW YORK, N.Y. 10008

Statement for 1989
Recipients of

ORIGINAL ISSUE
DISCOUNT

13-3472113

Record owner's identifying number	1 Total original issue discount	2 Other periodic interest	3 Early withdrawal penalty	4 Federal income tax withheld
	16.08			.00

LONNIE T EVANS
200 S 9TH AVENUE
OTTISON

SC 29536

M 0310-0006

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanctions will be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Department of the Treasury—Internal Revenue Service

Substitute Form 1099-OID OMB No. 1545-0117

